## **HUNTSVILLE POLICE CITIZENS ACADEMY**

## APPLICATION FOR ADMITTANCE

Name		Date of Birth*			
Last	First	Middle Initial			
Race *Sex*	_Social Security	Number*			
Address_					
AddressStreet Apt. #	<i>‡</i>	City	State	Zip	
Driver's License Number			State		
Employer					
Name		Address			
Home Phone		_Business Phor	ne		
E-mail address					
Have you ever been arrested or convicted of a crime? Yes No					
If yes, explain					
How did you hear about the academy?					
What do you expect to gain from attending?					
Will you be able to attend all class sessions? Yes No					
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I hereby certify that the information contained in this application is true and complete to the best of my knowledge. The Huntsville Police Department is authorized to make any investigation of my personal history deemed necessary for consideration to attend the <b>Citizens Police Academy</b> .					
Signature			Date		
FOR OFFICIAL USE ONLY					
Information varified by			Doto		
Information verified by			Dale		
Other					

<sup>\*</sup>This information is required for proper verification of data provided. It is not used for any other purpose